

1 GENERAL GOVERNMENT CABINET

2 Board of Dentistry

3 (New Administrative Regulation)

4 201 KAR 8:570. Registration of dental assistants.

5 RELATES TO: KRS 214.615, 2010 Ky. Acts ch. 85, sec. 5, 2010 Ky. Acts ch. 85, sec. 8, 2010 Ky. Acts
6 ch. 85, sec. 9, 2010 Ky. Acts ch. 85, sec. 13, 2010 Ky. Acts ch. 85, sec. 17

7 STATUTORY AUTHORITY: KRS 214.615(2), 2010 Ky. Acts ch. 85, sec. 3(1)(a), (b), (c), 2010 Ky.
8 Acts ch. 85, sec. 8(1)

9 NECESSITY, FUNCTION, AND CONFORMITY: 2010 Ky. Acts ch. 85, sec. 8(1) requires the board to
10 promulgate administrative regulations relating to requirements and procedures for registration, duties,
11 training, and standards of practice for dental assistants. This administrative regulation establishes those
12 requirements and procedures.

13 Section 1. Definitions. "Coronal polishing" means a procedure which is adjunctive to the dental
14 prophylaxis which is performed by a licensed dentist or dental hygienist.

15 Section 2. General Registration Requirements.

16 (1) An applicant desiring registration as a dental assistant in the Commonwealth shall at a
17 minimum:

18 (a) Understand, read, speak, and write the English language with a comprehension and
19 performance level equal to at least the ninth grade of education, otherwise known as Level 4,
20 verified by testing as necessary;

21 (b) Submit a completed and signed "Application for Dental Assistant Registration";

(c) Not be currently subject to disciplinary action pursuant to KRS Chapter 313 which would prevent registration;

(d) Provide proof of completion of the requirements of KRS 214.615(1);

(e) Provide proof of having current certification in cardiopulmonary resuscitation (CPR) which meets or exceeds the guidelines set forth by the American Heart Association;

(f) Submit to a criminal background check from the Administrative Office of the Courts in Kentucky, from the state or states of residence for the last five (5) years, or by fingerprint; and

(g) Provide proof of one (1) year dental office experience along with the name and address of the supervising dentist.

(2) Any individual practicing as a dental assistant in the Commonwealth of Kentucky on July 15, 2010, shall apply for registration no later than July 15, 2011.

(3) Any individual who has successfully completed a CODA accredited dental assisting program may register with the board without proving one (1) year of dental office experience.

Section 3. Issuance of Initial Registration. Once an applicant has completed the requirements of Section 2 of this administrative regulation the board shall:

(1) Issue a registration in sequential numerical order; or

(2) Deny registration due to a violation of KRS Chapter 313 or the administrative regulations promulgated thereunder.

Section 4. General Training Requirements.

(1) A registered dental assistant may perform any duty on the delegated duty list, which is incorporated by reference, so long as the individual has been trained by the employing dentist and the dentist retains proof of the training.

(2) Proof of training shall include the following:

1 (a) Name of the individual trained;

2 (b) Name of the individual providing the training;

3 (c) Date the training was completed; and

4 (d) A list of specific duties delegated to the assistant from the delegated duty list.

5 (3) This training may be conducted prior to the registration of the dental assistant if the training
6 is documented by the employing dentist.

7 Section 5. Coronal Polishing Requirements.

8 (1) A registered dental assistant may perform coronal polishing if he or she:

9 (a) Completes the training described in Section 5(2) of this administrative regulation; and

10 (b) Obtains a certificate from the authorized institution, which shall be provided to the board for
11 the assistant's file and maintained in the employee's personnel file at each place of employment.

12 (2) The required training shall consist of an eight (8) hour course taught at an institution of dental
13 education accredited by the Council on Dental Accreditation to include the following:

14 (a) Overview of the dental team;

15 (b) Dental ethics, jurisprudence and legal understanding of procedures allowed by each dental
16 team member;

17 (c) Management of patient records, maintenance of patient privacy, and completion of proper
18 charting;

19 (d) Infection control, universal precaution, and transfer of disease;

20 (e) Personal protective equipment and overview of Occupational Safety and Health
21 Administration requirements;

22 (f) Definition of plaque, types of stain, calculus, and related terminology and topics;

23 (g) Dental tissues surrounding the teeth and dental anatomy and nomenclature;

- 1 (h) Ergonomics of proper positioning of patient and dental assistant;
- 2 (i) General principles of dental instrumentation;
- 3 (j) Rationale for performing coronal polishing;
- 4 (k) Abrasive agents;
- 5 (l) Coronal polishing armamentarium;
- 6 (m) Warnings of trauma which can be caused by improper techniques in polishing;
- 7 (n) Clinical coronal polishing technique and demonstration;
- 8 (o) Written comprehensive examination covering the material listed in this section, which shall
- 9 be passed by a score of seventy-five (75) percent or higher;
- 10 (p) Completion of the reading component as required by Section 5(3) of this administrative
- 11 regulation; and
- 12 (q) Clinical competency examination supervised by a dentist licensed in Kentucky, which shall
- 13 be performed on a live patient.
- 14 (3) A required reading component for each course shall be prepared by each institution offering
- 15 coronal polishing education which shall:
- 16 (a) Consist of the topics established in Section 5(2)(a) to (n) of this administrative regulation;
- 17 (b) Be provided to the applicant prior to the course described in Section 5(2) of this
- 18 administrative regulation; and
- 19 (c) Be reviewed and approved by the Board.
- 20 (4) The institutions of dental education approved to offer the coronal polishing course in
- 21 Kentucky shall be:
- 22 (a) University of Louisville School of Dentistry;
- 23 (b) University of Kentucky College of Dentistry;

- (c) Western Kentucky University Dental Hygiene Program;
- (d) Lexington Community College Dental Hygiene Program; and
- (e) Kentucky Community Technical College System Dental Hygiene or Dental Assisting Programs.

Section 6. X-rays by Registered Dental Assistants. A registered dental assistant may take x-rays under the direct supervision of a dentist licensed in Kentucky if the assistant completes:

- (1) A six (6) hour course in dental radiography safety approved by the board; and
- (2) Four (4) hours of instruction in dental radiography technique while under the employment and supervision of the dentist in the office; or
- (3) A four (4) hour course in radiography technique approved by the board.

Section 7. Requirements for Starting Intravenous Access Lines.

(1) An individual registered as a dental assistant in Kentucky and not subject to disciplinary action under KRS Chapter 313 who desires to start intravenous (IV) access lines while under the direct supervision of a dentist who holds a sedation or anesthesia permit issued by the board shall:

- (a) Submit a signed and completed "Application for Intravenous Access Line Registration";
- (b) Pay the fee required by 201 KAR 8:520;
- (c) Submit documentation proving successful completion of a board-approved course in starting IV access lines.

(2) Individuals authorized to practice under this provision shall receive a registration from the board indicating registration to start IV access lines.

(3) A registered dental assistant shall not start IV access lines if the registrant does not hold a registration to start IV access lines issued by the board.

1 Section 8. Renewal Requirements. An individual desiring renewal of an active dental assistant
2 registration shall:

- 3 (1) Submit a completed and signed “Application for Renewal of Dental Assistant Registration”;
- 4 (2) Maintain with no more than a thirty (30) day lapse CPR certification which meets or exceeds
5 the guidelines set forth by the American Heart Association unless a hardship waiver is submitted
6 to and subsequently approved by the board; and
- 7 (3) Have their application signed by the supervising dentist as to their continued competency in
8 the duties assigned to them from the delegated duties list.

9 Section 9. Expiration of a Registration.

10 (1) A registration shall expire:

- 11 (a) Upon termination of employment as a dental assistant under the direct supervision of a
12 licensed dentist; or
- 13 (b) Upon the expiration date listed on the registration in the event that a registered dental
14 assistant fails to renew the registration.

15 (2) Any registration issued by the board prior to December 31, 2010 shall be valid until
16 December 31, 2012.

17 Section 10. Reciprocity. A registered dental assistant who does not meet the requirements of Section 5
18 of this administrative regulation may apply for and be granted a certificate to perform coronal polishing
19 in the Commonwealth of Kentucky if he or she provides:

20 (1) Credentialing information which shall include:

- 21 (a) A copy of the credentials issued in the other jurisdiction; and
- 22 (b) A copy of the law and administrative regulations of that jurisdiction which specify
23 requirements that are equal to or greater than the requirements established in 2010 Ky. Acts ch.

85, sec. 8 and this administrative regulation; or

(2) Educational information which shall include:

(c) A syllabus of course work successfully completed by the applicant from the accrediting dental hygiene or dental assisting program; and

(d) Verification of successful completion of the accredited course.

Section 11. Verification of Registration. An individual desiring verification of a dental assistant registration shall:

(1) Submit a signed and completed “Verification of License or Registration Form”; and

(2) Pay the fee required by 201 KAR 8:520.

Section 12. Duplicate Registrations. An individual desiring a duplicate dental assistant registration shall:

(1) Submit a signed and completed “Duplicate License or Registration Request Form”; and

(2) Pay the fee required by 201 KAR 8:520.

Section 13. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) “Application for Dental Assistant Registration”, July 2010;

(b) “Delegated Duty List”, July 2010;

(c) “Application for Intravenous Access Line Registration”, July 2010;

(d) “Application for Renewal of Dental Assistant Registration”, July 2010;

(e) “Verification of Licensure or Registration Form”, July 2010; and

(f) “Duplicate License or Registration Request Form”, July 2010.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky, 40222, Monday through Friday, 8:00 a.m. to 4:30 p.m. This material is also available on the

1 board's Web site at <http://dentistry.ky.gov>.

DR. WILLIAM P. BOGGESS, DMD, Board President

July 10, 2010

Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD: A public hearing on this administrative regulation shall be held on Tuesday, August 31, 2010, at 9:00 a.m. at the office of the Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, KY 40222. Individuals interested in being heard at this hearing shall notify this agency in writing no later than August 24, 2010, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who wishes to be heard will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made.

If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted until August 31, 2010.

Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

Contact person: Brian K. Bishop, Executive Director, Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, KY, 40222. Phone (502) 429-7280, fax (502) 429-7282, email briank.bishop@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Administrative Regulation #: **201 KAR 8:570. Registration of dental assistants.**

Contact Person: **Brian K. Bishop, Executive Director
Board of Dentistry**

(1) Provide a brief summary of:

(a) What this administrative regulation does: **This administrative regulation establishes requirements and procedures for the registration of dental assistants and establishes the requirements for training in coronal polishing for registered dental assistants as required by 2010 Ky. Acts ch. 85, sec. 8.**

(b) The necessity of this administrative regulation: **This administrative regulation is necessary to implement 2010 Ky. Acts ch. 85, sec. 8, which requires the board to promulgate administrative regulations regarding the requirements for the registration requirements, duties, training, and standards of practice for registered dental assistants.**

(c) How this administrative regulation conforms to the content of the authorizing statute: **This administrative regulation is necessary to implement 2010 Ky. Acts ch. 85, sec. 8, which requires the board to promulgate administrative regulations regarding the requirements for the registration requirements, duties, training, and standards of practice for registered dental assistants.**

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: **This administrative regulation is necessary to implement 2010 Ky. Acts ch. 85, sec. 8, which requires the board to promulgate administrative regulations regarding the requirements for the registration requirements, duties, training, and standards of practice for registered dental assistants.**

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: **N/A**

(b) The necessity of the amendment to this administrative regulation: **N/A**

(c) How the amendment conforms to the content of the authorizing statute: **N/A**

(d) How the amendment will assist in the effective administration of the statutes: **N/A**

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: **This is a new level of provider to be registered by the board so the number of individuals affected by this regulation is unknown. Additionally, the Kentucky Board of Dentistry will be affected by this administrative regulation.**

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: **This regulation requires individuals to register with the board after having been trained for a minimum of one (1) year by a supervising dentist. The Kentucky Board of Dentistry is charged by 2010 Ky. Acts ch. 85 to regulate the practice of dentistry in the Commonwealth.**

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): **There will be no new cost to the individual with this emergency administrative regulation. The Board is a self funded agency who's budget was approved in HB 1 of the 2010 Extraordinary Session of the General Assembly. HB 1 provided for FY 2010 – 2011 an allotment of \$705,400 and for FY 2011 – 2012 and allotment of \$714,000**

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3): **The Kentucky Board of Dentistry is the regulatory agency and accrues no benefits from the regulations but rather provides enforcement of the chapter and processes for it licensees to legally practice as a registered dental assistant in the Commonwealth.**

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation: **The Board is a self funded agency whose budget was approved in HB 1 of the 2010 Extraordinary Session of the General Assembly. HB 1 provided for FY 2010 – 2011 an allotment of \$705,400 and for FY 2011 – 2012 and allotment of \$714,000. The Kentucky Board of Dentistry receives no monies from the General Fund.**

(a) Initially: **No additional costs are expected.**

(b) On a continuing basis: **No additional costs are expected.**

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: **The Kentucky Board of Dentistry is a fully self funded agency and derives it funding from fees paid by it licensees.**

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: **The fees found in 201 KAR 8:520E make the agency financially solvent.**

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: **This administrative regulation does not establish fees or directly or indirectly increase any fees.**

(9) TIERING: Is tiering applied? **Tiering was not appropriate in this administrative regulation because the administrative regulation applies equally to all registered dental assistants.**

FISCAL NOTE ON STATE OR LOCAL GOVERNMENT

Regulation No. 201 KAR 8:570.

Contact Person: Brian K. Bishop, Executive Director,
Board of Dentistry

1. Does this administrative regulation relate to any program, service, or requirements of a state or local government (including cities, counties, fire departments, or school districts)?

Yes X No

If yes, complete questions 2-4.

2. What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation?

The Kentucky Board of Dentistry is the only state government entity which will be impacted by this regulation.

3. Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.

2010 Ky. Acts ch. 85

4. Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.

There will be no new net fiscal affect on the Kentucky Board of Dentistry as the agency is a fully self funded agency and receives no general fund dollars.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year?

Compliance with this regulation will provide the agency with enough money to meets its budgetary obligations as set forth in HB1 of the 2010 Extraordinary Session of the General Assembly.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years?

Compliance with this regulation will provide the agency with enough money to meets its budgetary obligations as set forth in HB1 of the 2010 Extraordinary Session of the General Assembly.

(c) How much will it cost to administer this program for the first year?

FY 2010 – 2011 as allocated in HB 1 from the 2010 Extraordinary Session of the General Assembly is \$705,400

(d) How much will it cost to administer this program for subsequent years?

FY 2011 – 2012 as allocated in HB 1 from the 2010 Extraordinary Session of the General Assembly is \$714,000

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

SUMMARY OF MATERIAL INCORPORATED BY REFERENCE

- (1) The “Application for Dental Assistant Registration” is the 2 page application form that individuals are required to file in order to be registered to practice dental assisting in the Commonwealth of Kentucky. 2010 Ky. Acts ch. 85, sec. 8 requires the board to define requirements for registration.
- (2) The “Delegated Duty List” is the 2 page form that details the procedures approved as part of the duties of a registered dental assistant. The board is required to define these duties by 2010 Ky. Acts ch. 85, sec. 8.
- (3) The “Application for Intravenous Access Line Registration” is a 1 page form that registered dental assistants are required to file in order to be registered with the board to start intravenous access lines. 2010 Ky. Acts ch. 85, sec. 8 requires the board to define requirements for registration.
- (4) The “Application for Renewal of Dental Assistant Registration” is the 1 page form that registered dental assistants are required to file in order to renew an active registration. 2010 Ky. Acts ch. 85, sec. 8 requires the board to organize renewal programs for dental assistants.
- (5) The “Verification of Licensure or Registration Form” is the 1 page form that individuals are required to file in order to request an official verification of registration in the Commonwealth of Kentucky. 2010 Ky. Acts ch. 85, sec. 8 requires the board to define processes related to the registration of dental assistants.
- (6) The “Duplicate License or Registration Form” is the 1 page form that individuals are required to file in order to request a duplicate copy of an active dental assistant registration issued by the board. 2010 Ky. Acts ch. 85, sec. 8 requires the board to define processes related to the registration of dental assistants.